

**FEE TRANSMITTAL**

Electronic Version v08

Stylesheet Version v08.0

<b>Title of Invention</b>	System and method for end-users to customize customer service business solutions offered as a service over a network																											
Application Number :																												
Date :																												
First Named Applicant:		Mr. Dimitri J Stephanou																										
Attorney Docket Number:																												
<b>TOTAL FEE AUTHORIZED \$ 530</b>																												
Patent fees are subject to annual revisions on or about October 1st of each year.																												
Filing as small entity																												
<b>BASIC FILING FEE</b>																												
<table border="1"><thead><tr><th>Fee Description</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Utility Filing Fee</td><td>2001</td><td>385</td><td>385</td></tr><tr><td colspan="3"></td><td>Subtotal For Basic Filing Fees: \$ 385</td></tr></tbody></table>				Fee Description	Fee Code	Amount \$	Fee Paid \$	Utility Filing Fee	2001	385	385				Subtotal For Basic Filing Fees: \$ 385													
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			Subtotal For Basic Filing Fees: \$ 385																									
<b>EXTRA CLAIM FEES</b>																												
<table border="1"><thead><tr><th>Fee Description</th><th>Extra Claim</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Total Claims : 18</td><td>0</td><td>2202</td><td>9</td><td>0</td></tr><tr><td>Independent Claims : 1</td><td>0</td><td>2201</td><td>43</td><td>0</td></tr><tr><td>Multiple Dependent Claims</td><td></td><td>2203</td><td>145</td><td>145</td></tr><tr><td colspan="3"></td><td colspan="2">Subtotal For Extra Claims Fees: \$ 145</td></tr></tbody></table>				Fee Description	Extra Claim	Fee Code	Amount \$	Fee Paid \$	Total Claims : 18	0	2202	9	0	Independent Claims : 1	0	2201	43	0	Multiple Dependent Claims		2203	145	145				Subtotal For Extra Claims Fees: \$ 145	
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			Subtotal For Extra Claims Fees: \$ 145																									
<b>AUTHORIZED BILLING INFORMATION</b>																												
<b>The commissioner is hereby authorized to charge indicated fees and credit any overpayments to:</b>																												
Credit account number:		2732																										
Expiration Date (YYYYMMDD):		2004-08-31																										
Authorized name:		Dimitri J. Stephanou																										
Billing address:		33647																										

Adjustment date: 08/26/2004 BHABTEW  
07/27/2004 EFSPROD 00000033 10710644  
02 FC:2203 -145.00 OP

Refund Ref:  
08/26/2004 0030017457

Credit Card Refund Total: \$145.00

Master C: XXXXXXXXXXXX2732